BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

| Meeting Date: July 17, 2002 | Division: | County Administrator |
|---|------------------|---|
| Bulk Item: Yes X No | Department:_ | County Administrator |
| AGENDA ITEM WORDING: Approval of Public Official Bond for Commission | ner Humberto Jir | menez. |
| ITEM BACKGROUND: Commissioner Jimenez was appointed by the Gov His term began on June 6, 2002 and will end on N | | |
| PREVIOUS RELEVANT BOCC ACTION: | | |
| N/A | | |
| CONTRACT/AGREEMENT CHANGES: | | هند ند و بر ون المهمور و المهمور |
| N/A | | |
| STAFF RECOMMENDATIONS: | | |
| Approval. | | |
| TOTAL COST: \$50.00 | BUDG | GETED: Yes No |
| COST TO COUNTY: \$50.00 _ | | |
| REVENUE PRODUCING: Yes No A | MOUNT PER | MONTH Year |
| APPROVED BY: County Atty OMB/I | Purchasing | Risk Management |
| DIVISION DIRECTOR APPROVAL: | James | L. Roberts |
| DOCUMENTATION: Included X | To Follow | Not Required |
| DISPOSITION: | | AGENDA ITEM #_05 |

Revised 2/27/01

State of Florida Secretary of State

Division of Elections Room 1802, The Capitol Tallahassee, Florida 32399-0250

Fublic Official Bond

| County of MONROE | - |
|--|--|
| KNOW ALL MEN BY THESE PRESENTS, THE HUMBERTO JIMENEZ | at we, |
| 177 Hibuscus St, Tavernier, Fl 33070 | |
| (Full Name op line | and Address [bottom line] of Principal) |
| as Principal, and The Ohio Casualty Insurance C | Company |
| as Surcty, are bound unto the governor of the State of | Florida, and his successors in office, in the sum of |
| 2 000 00 | hereby bind ourselves and each of our heirs, executors, administrators, |
| | solvey said ourselves and each of our news, excediors, administrators, |
| successors and assigns, jointly and severally. | |
| | SUCH, That, whereas, said official was elected 🔲 appointed 🗷 |
| | this office for a term beginning JUNE 6, 2002 and ending |
| (Name of Office) | |
| NOVEMBER 18, 2002 and until his/her successor is | qualified according to the Constitution and Laws of the State of |
| Florida. | |
| NOW, THEREFORE, If the official shall faith | fully perform the duties of his/her office as provided by law, |
| this obligation is void. | X Signature of Official |
| Signed and Sealed: 7/5/03 | (Signature St Official) |
| • • | 136 North Third Street Hamilton, Ohio 45025 |
| | (Address of Main Surety company) Regan Insurance Agency Inc. |
| | (Name of Local Bonding Company) 90144 Overseas Highway, Tavernier, Fl 33070 |
| (\$EAL) | By X Lande, & Mozine |
| It is understood that the Surety is | not (Signature of Licensed Resident Agent) |
| liable for any acts of omission or | A182343 305-852-3234 |
| commission occuring prior to July 5t 2002 | h (Social Security Number of Licensed Resident Agent) Brenda B. Monroe |
| | (Type Name of License Resident Agent) |
| The above is approved: | ···· |
| Signature: Approved by: | |
| | Countersigned: |
| | Step La B MONTOE. Florida Résident Agent |

OATH OF OFFICE STATE OF FLORIDA

| COUNTY OF MONROE | | |
|--|--|--|
| I DO SOLEMNLY SWEAR (OR AFFIRM) that I will support, protect and defend the Constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the State, and that I will well and faithfully perform the duties of MONROE COUNTY COMMISSIONER | | |
| of which I am now about to enter, so help me God. | | |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING OATH AND THAT THE FACTS STATED IN IT ARE TRUE. | | |
| (1) Annheits Amenes 7/3/02 Signature Date Signed | | |
| ACCEPTANCE | | |
| SECRETARY OF STATE THE CAPITOL TALLAHASSEE, FLORIDA 32399-0250 | | |
| Laccept the office of COUNTY COMMISSIONER. | | |
| The above is the oath of office taken by me. In addition to the above office I also hold the | | |
| office of | | |
| My mailing address is: ☐ home ☐ office | | |
| (2) 177 HIBISCUS 3 (3) Sign as you desire commission issued | | |
| TAVERNIER FL 33070 HUMBERTO JIMENEZE City, State, Zip Code Print or type name as signed above | | |
| Person taking oath sign on line (1) above. Sign acceptance on line (3) after giving address on line (2). | | |

The state of the s

CHRTIFIED COPY OF POWER OF ATTORNEY THE OHIO CASUALTY INSURANCE COMPANY WEST AMERICAN INSURANCE COMPANY

No. 35-087

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, an Ohio Corporation, and WEST AMERICAN INSURANCE COMPANY, an Indiana Corporation, in pursuance of authority , mated by Article VI, Section 7 of the By-Laws of The Ohio Casualty Insurance Company and Article VI, Section 1 of West American Insurance Company, do hereby nominate, constitute and appoint: Robert E. Regen et Brenda B. Moarree of Taversiter, Florida its trus and juviful agent (s) and strongly (a)-in-fact to make, execute, seal and deliver for and (-) its bohalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not executing in any single insurance ONE MILLION (\$1,000,00 .00) DOLLARS, excluding, however, any boad(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected or less of the Companies at their administrative offices in Hamilton, Ohio, in their own proper persons.

The authority granted beseunder supersedes any previous authority beretofore granted the above manual attentions.

In WITNESS WHEREOF, the indersigned officer of the said The Ohio Casualty Insurance Company and West Automan Insurance Company has hereuran subscribed his name and affixed the Corporate Scal of such Company this 21st day of July, 2000.





Sam faurence

the Keyland

Sam Lawrence, Assistant Secretary

STATE OF OHIO, COUNTY OF BUTLER

On this 21st day of July, 2008 before the pubscriber, a Notary while of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came Sam Lawrence, Assistant Secretary of THE OHIO CASUALTY INSURANCE COMPANY and WEST AMERICAN INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, as he acknowledged the execution of the same, and being by me duly atterm deposeth and saith, that he is the officer of the Companies aforesaid, and that the seals affixed to the preciding instrument are the Companies, and the said Companies and the said Companies and the said Companies are the Companies.

IN TESTIMONY WITTEREOF, I have hereunto set my hane and affixed my Official Soal at the City of Hamilton. State of Ohio, the day and year first above written.



Chery & Gregory

Notary Public at and for County of thater, State of Ohio My Commission expires August 6, 2002.

This power of attorney is granted under and by authority of Article VI, Section 7 of the By-Laws of The Ohio Casualty Insurance Company and Article VI, Section I of West American Insurance Company, extracts from which read.

Article VI, Section 7. APPOINTMENT OF ATTORNEYS. V.FACT, ETC. "The chairman of the board, the president, any vice-president, the secretary or any seasalant secretary of each of these Companies shall be and is hereby vested with full, power and sutherity to appoint attempts, in-fact for the purpose of signing the name of the Companies as surety to, and to execute statch the corporate seal, acknowledge and delt, or any end all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation. If the official representative thereof, or to any country or state, or any official board or boards of country or state, or the United States of America, or to any other political subdivision."

Article VI, Section 1. APPOINTMENT OF RESIDENT OF TICERS. "The Chairman of the Board, the President, any Vice President, a Secretary or any Assistant Secretary shall be and its bereby vested with full power and eathorny to appoint a territory in fact for the purpose of signing the name of the corporation as surery or guaranter, and to execute, attach the corporate scal, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of startly-ship or guarantee, and policies of insurance to be given in favor of an individual, firm, corporation or the official in presentative thereof, or to any county or state, or any official board or boards of any county or state, or the United States of America, or to any other political subdivision."

This instrument is signed and sested by faceinaile as authorized to the following Resolution adopted by the respective directors of the Companies (adopted May 27, 1970-The Ohio Casualty Insurance Company, adopted April 24, 1980-West American Insurance Company):

"RESOLVED that the signature of any officer of the Company and the Company may be affixed by factimile to any power of strongly or any Assistant Secretary certifying to the correctness of any copy of a power of attempt and the Company may be affixed by factimile to any power of strongly or copy thereof issued on behalf of the Company. Such signatures and seal are hereby adopted by the Company as original signatures and seal, to be valid and hinding upon the Company with the same force and effect as though manually affixed."

CERTIFICATE



Winds



Mal I Schricht

Assistant Societary